

UNITED STATES DISTRICT COURT
DISTRICT OF OREGON

Kimberly D. Michel et al.

Civil Case No. 3:15-cv-01567-HZ

Plaintiff(s),
v.

APPLICATION FOR SPECIAL
ADMISSION – *PRO HAC VICE*

Navient Solutions, Inc.

Defendant(s).

Attorney Kathryn A. Williams requests special admission *pro hac vice* in
the above-captioned case.

Certification of Attorney Seeking *Pro Hac Vice* Admission: I have read and understand the
requirements of LR 83-3, and certify that the following information is correct:

(1) **PERSONAL DATA:**

Name: Williams Kathryn A.
(Last Name) (First Name) (MI) (Suffix)
Firm or Business Affiliation: Williamson & Williams LLP
Mailing Address: 2239 W Viewmont Way W
City: Seattle State: WA Zip: 98199
Phone Number: 206 294-3085 Fax Number: _____
Business E-mail Address: Kim@Williamslaw.com

(2) BAR ADMISSIONS INFORMATION:

- (a) State bar admission(s), date(s) of admission, and bar ID number(s):
Washington State Bar Association, 5/16/79, 9077

- (b) Other federal court admission(s), date(s) of admission, and bar ID number(s):
United States District Court, Western District of Washington, 9/17/79
Ninth Circuit Court of Appeals, 8/20/91

(3) CERTIFICATION OF DISCIPLINARY ACTIONS:

- (a) ☒ I am not now, nor have I ever been subject to any disciplinary action by any state or federal bar association; or
- (b) ☐ I am now or have been subject to disciplinary action from a state or federal bar association. (See attached letter of explanation.)

(4) CERTIFICATION OF PROFESSIONAL LIABILITY INSURANCE:

I have professional liability insurance, or financial responsibility equivalent to liability insurance, that will apply and remain in force for the duration of the case, including any appeal proceedings.

(5) REPRESENTATION STATEMENT:

I am representing the following party(s) in this case:

Kimberly D. Michel, Plaintiff and potential class representative

(6) CM/ECF REGISTRATION:

Concurrent with approval of this *pro hac vice* application, I acknowledge that I will become a registered user of the Court's Case Management/Electronic Case File system. (See the Court's website at ord.uscourts.gov), and I consent to electronic service pursuant to Fed. R. Civ. P 5(b)(2)(E) and the Local Rules of the District of Oregon.

DATED this 26th day of August, 2015

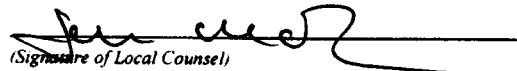

(Signature of Pro Hac Counsel)

Kathryn A. Williams
(Typed Name)

CERTIFICATION OF ASSOCIATED LOCAL COUNSEL:

I certify that I am a member in good standing of the bar of this Court, that I have read and understand the requirements of LR 83-3, and that I will serve as designated local counsel in this particular case.

DATED this 17th day of September, 2015


(Signature of Local Counsel)

Name: Baxter Justin M
(Last Name) (First Name) (MI) (Suffix)

Oregon State Bar Number: 992178

Firm or Business Affiliation: Baxter & Baxter, LLP

Mailing Address: 8835 SW Canyon Lane, Suite 130

City: Portland State: OR Zip: 97225

Phone Number: (503) 297-9031 Business E-mail Address: justin@baxterlaw.com

COURT ACTION

- ☐ Application approved subject to payment of fees.
☐ Application denied.

DATED this _____ day of _____, _____

Judge